PATENT APPLICATION CE DETERMINATION RECORD Effective December 8, 2004

Application or Docket Number

| 10531540 |
|----------|
| 770070 |

| CLAIMS AS FILED - PAF | ≀ T | |
|-----------------------|------------|--|
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SMALL ENTITY OTHER THAN TYPE OR SMALL ENTITY (Column 1) (Column 2) U.S. NATIONAL STAGE FEES RATE FEE RATE BASIC FEE SMALL ENT. = \$ 150 LARGE ENT. = \$ 300 BASIC FEE OR BASIC FEE Satisfies PCT Article 33(1)-All other situations = **EXAMINATION FEE** EXAM. FEE (4) = \$50/\$100\$ 100 / \$ 200 EXAM. FEE U.S. is ISA = \$50/\$ 100 All other situations = SEARCH FEE ALL other countries = SEARCH FEE SEARCH FEE \$ 250 / \$ 500 \$ 200 / \$ 400 FEE FOR EXTRA SPEC. PGS. minus 100 = 150 =X \$ 125 =X \$ 250 =TOTAL CHARGEABLE CLAIMS minus 20 = X \$ 25 =OR X \$ 50 =INDEPENDENT CLAIMS minus 3 = X \$ 100 =OR X \$ 200 =MULTIPLE DEPENDENT CLAIM PRESENT + \$ 180 = OR + \$ 360 = * If the difference in column 1 is less than zero, enter "0" in column 2 TOTAL OR TOTAL

CLAIMS AS AMENDED - PART II

| | | (Column 1) | | (Column 2) | (Column 3) |
|-------------|-------------|---|-------|---|------------------|
| NTA | | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| AMENDMENT A | Total | * | Minus | ** | = |
| AME | Independent | * | Minus | *** | = |
| | FIRST PRES | | | | |

| | | OTHER THAN | | |
|--------------|----|--------------|--|--|
| SMALL ENTITY | OR | SMALL ENTITY | | |

| RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
|---------------------|------------------------|----|---------------------|------------------------|
| X \$ 25 = | | OR | X \$ 50 = | |
| X \$ 100 = | | OR | X \$ 200 = | |
| + \$ 180 = | | OR | + \$ 360 = | |
| TOTAL ADDIT. FEE | | or | TOTAL ADDIT. FEE | |

| | | (Column 1) | | (Column 2) | (Column 3) | |
|-----------|--|---|-------|---|------------------|--|
| NT B | | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | |
| IDME | Total | * | Minus | ** | = | |
| AMENDMENT | Independent | * | Minus | *** | = | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | |

| RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
|---------------------|------------------------|----|---------------------|------------------------|
| X \$ 25 = | | OR | X \$ 50 = | |
| X \$ 100 = | | OR | X \$ 200 = | |
| + \$.180 = | | or | + \$ 360 = | - |
| TOTAL ADDIT. FEE | | OR | TOTAL ADDIT. FEE | |

If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

^{**} If the "Highest Number Previously Paid For" IN THIS SPACE is less than '20', enter "20".

^{***} If the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.